Dup

Engrs. [illegible]

# ATTESTATION PAPER

No.

Folio.

## CANADIAN OVER-SEAS EXPEDITIONARY FORCE

### QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS)

1. What is your name? Arthur Lorne Taylor
2. In what Town, Township, or Parish, and in what Country were you born? McKellar, Ont.
3. What is the name of your next-of-kin? Mrs. A. J. Taylor (mother)
4. What is the address of your next-of-kin? 71 Metcalfe St, Toronto
5. What is the date of your birth? July 15, 1888
6. What is your trade or calling? Teamster
7. Are you married? No
8. Are you willing to be vaccinated or re-vaccinated? yes
9. Do you now belong to the Active Militia? 2nd F.A.C.E.
10. Have you ever served in any Military Force? If so, state particulars of former Service. 23rd Regiment, 1 year.
11. Do you understand the nature and terms of your engagement? yes
12. Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE? yes

A. L. Taylor (Signature of Man.)

R. L. Orpen (Signature of Witness.)

### DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Arthur Lorne Taylor, do solemnly declare that the above answers made by me to the above questions are true, and that I am willing to fulfil the engagements by me now made, and I hereby engage and agree to serve in the **Canadian Over-Seas Expeditionary Force**, and to be attached to any arm of the service therein, for the term of one year, or during the war now existing between Great Britain and Germany should that war last longer than one year, and for six months after the termination of that war provided His Majesty should so long require my services, or until legally discharged.

A. L. Taylor (Signature of Recruit.)

Date June 7 1915 R. L. Orpen (Signature of Witness.)

### OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Arthur Lorne Taylor, do make Oath, that I will be faithful and bear true Allegiance to His Majesty **King George the Fifth**, His Heirs and Successors, and that I will as in duty bound honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity, against all enemies, and will observe and obey all orders of His Majesty, His Heirs and Successors, and of all the Generals and Officers set over me. So help me God.

A. L. Taylor (Signature of Recruit.)

Date June 7 1915 R. L. Orpen (Signature of Witness.)

### CERTIFICATE OF MAGISTRATE.

The Recruit above-named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.

The above questions were then read to the Recruit in my presence.

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said Recruit has made and signed the declaration and taken the oath before me, at Toronto this 7th day of June 1915

[illegible] (Signature of Justice.)

I certify that the above is a true copy of the Attestation of the above-named Recruit.

F. A. McGinnis (Approving Officer.)

Lieut

M. F. W. 23.
200 M.—3-15.
H.Q. 1772-39-841.

## DESCRIPTION OF Arthur Lorne Kaylor ON ENLISTMENT.

Apparent Age 25 years 11 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 7¼ ins.

Chest measurement:
- Girth when fully expanded 40 ins.
- Range of expansion 4 ins.

Complexion Fair

Eyes Blue

Hair Fair

Religious Denominations:
- Church of England
- Presbyterian
- Methodist Meth.
- Baptist or Congregationalist
- Other Protestants (Denomination to be stated.)
- Roman Catholic
- Jewish

Distinctive marks, and marks indicating congenital peculiarities or previous disease.

(Should the Medical Officer be of opinion that the recruit has served before, he will, unless the man acknowledges to any previous service, attach a slip to that effect, for the information of the Approving Officer.)

Left arm vaccination
Cut on lower side of jaw.
2 cuts on right wrist
1 scar " " leg.
above knee.

## CERTIFICATE OF MEDICAL EXAMINATION.

I have examined the above-named Recruit and find that he does not present any of the causes of rejection specified in the Regulations for Army Medical Services.

He can see at the required distance with either eye; his heart and lungs are healthy; he has the free use of his joints and limbs, and he declares that he is not subject to fits of any description.

I consider him* Fit for the Canadian Over-Seas Expeditionary Force.

Date June 4 1915 Jas. W. Barton Captain

Place Toronto, Ont. 2nd D.A.S.C. Medical Officer.

*Insert here "fit" or "unfit."

NOTE.—Should the Medical Officer consider the Recruit unfit, he will fill in the foregoing Certificate only in the case of those who have been attested, and will briefly state below the cause of unfitness:—

## CERTIFICATE OF OFFICER COMMANDING UNIT

having been finally approved and inspected by me this day, and his Name, Age, Date of Attestation, and every prescribed particular having been recorded, I certify that I am satisfied with the correctness of this Attestation.

Jas. Kenna (Signature of Officer.)

Date June 25 1915 Major C.E.

D.C. Engr. Training Depot

S

Proceedings of Court of Inquiry or on men reported Missing on Active Service.....

Attestation Papers..... 1

Declaration of change of name.....

Authority for special enlistments.....

Documents of re-enlisted men.....

Regimental Conduct Sheet ..... 1

Compulsory Stoppages.....

Casualty Forms..... 1

Proceedings on discharge..... 1

Corps History Sheet.....

Date and No. of Deposit Receipt for Purchase Money and Amount.....

Parchment Certificate.....

Medical Report for Invalids.....

Medical History Sheet..... 1

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet..... 1

Clothing Transfer Certificate.....

Inventory of Kit.....

Last Pay Certificate.....

A.F.B. 179 - 2
178 - 2
122 - 1
M F W 125 - 2
W 138 - 1

M. F. W. 62.
25m.—12-15.
H. Q. 1772-39-935.

# DISCHARGE DOCUMENTS

Name Taylor, Arthur Zorne

Regt. No. 2270 Rank Driver.

Corps C.E.T.D.

Med. unfit

M

14

1

02100

H

R. O. No.

H. Q. No.

H

~~Soldiers Civil Re. Est.~~
~~22/1/20~~
Doc Rel 24-1-19

Docs Returned
7-5-19

~~(Comp) Docs. to B.P.C. on M.F.W 2505~~
Ref B.P.C. Spec 1116
d/7-11-19
G.S.

22/11/19

26 - 21
4 - 21
6 - 21
1

Comp to B.P.C. on
M.F.W 2505
Ref B.P.C. Spec 1667
d/29/1/20
G.S.

No. 2270. Rank Spr. Name Taylor, Arthur L.

T. O. S. Unit Casualties.

M. D. H. Q.

| PAID FROM | PAID TO | SIG. OR REC'T | PROMOTIONS, TRANSFERS, DISCHARGES, ETC. | |
|---|---|---|---|---|
| | | | PARTICULARS | AUTHORITY |
| 1916 | 1916 | | | |
| Jan. 8. | Feb. 29. | R. | From C. E. I. D. | |

No. 2270 Rank Pvt. (C.E.T.D.) Name Taylor A. L.

T. O. S. Unit Discharge Depot

M. D. 5.

| PAID FROM | PAID TO | SIG. OR REC'T | PROMOTIONS, TRANSFERS, DISCHARGES, ETC. | |
|---|---|---|---|---|
| | | | PARTICULARS | AUTHORITY |
| 1916. Jan. | 1916. Jan. | ✓ | Dates not stated. | |

# MEDICAL HISTORY SHEET.

*Surname* Taylor *Christian Name* Arthur Lorne

Examined { on 4 day of June 1915 / at Toronto, Ont

Birthplace { City or Town McKellar / County Ont.

Apparent age 25 yrs. 11 mos.

Trade or occupation Teamster

Height 5 Feet 7 1/4 Inches.

Weight 165 Lbs.

Chest measurement { Minimum 36 inches. / Maximum expansion 40 inches

Physical development Good

Small-Pox Marks —

Vaccination Marks { Arm ~~Right.~~ Left. ✓ / Number 1 ✓

When Vaccinated last 3 yrs ago

(*a*) Marks indicating congenital peculiarities or previous disease scar on right leg above knee

(*b*) Slight defects but not sufficient to cause rejection

✓

Approved by Jas. W. Barton

Rank Captain M.O. 2nd. F.C.C.E.

| Date | Fit or Unfit | Examined for Re-engagement, |
|---|---|---|
| | | M.O. |
| | | M.O. |
| | | M.O. |
| | | M.O. |
| | | M.O. |
| | | M.O. |
| | | M.O. |

| Date | Result | Vaccinations. |
|---|---|---|
| | | M.O. |
| | | M.O. |
| | | M.O. |

| Date | Result | Anti-Typhoid Inoculations, Etc. |
|---|---|---|
| | | M.O. |
| | | M.O. |
| | | M.O. |

*Enlisted on* 7 *day of* June 1915 *at* Toronto

| | Corps. | Regt'l Number. | Habits. | Date. |
|---|---|---|---|---|
| Joined on enlistment | C.E.T.D. | 2270 | | |
| Transferred to.. ..... | | | | |

## EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

| Station. | Date. | Disease. | Result. |
|---|---|---|---|
| | | | |

N. B —This sheet to be disposed of in accordance with instructions in the Regulations for Army Medical Service, on the man becoming non-effective ; the date and cause being stated on next page.

M. F. B. 313.

100M.—1-15.
H. Q. 1772-39-439.

Surname Taylor Christian Name Arthur L.

| STATION. | Date of Arrival at the Station. | Dates of Admission into Hospital. Day | Month | Year | Dates of Discharge from Hospital. Day | Month | Year | DISEASE. | Number of days in Hospital. | Remarks on nature of the disease: how induced: if mild or severe: if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations. | Signature of Medical Officer. |
|---|---|---|---|---|---|---|---|---|---|---|---|
| Mare Barracks | Hosp. | 18 | 10 | 15 | 22 | 10 | 15 | Tachycardia | | | Det Bench Capt Caine. |

# CLINICAL CHART.

(To be attached to Case Sheet.)

Army Form B. 181.

Corps Cav. Engrs  Military Hospital Wm. Beaumont

No. 2270  Rank and Name Pvt Taylor, A. L.  Age 27  Service 3/12

Disease Lachrymalitis  Date of admission 15-10-13  Date of discharge  Result

| Dates of Observation | 15 | 19 | 20 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Days of Disease | 1 | 2 | 3 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Temperature Fahrenheit | Time A.M. P.M. | Time A.M. P.M. | Time A.M. P.M. | Time A.M. P.M. | Time A.M. P.M. | Time A.M. P.M. | Time A.M. P.M. | Time A.M. P.M. | Time A.M. P.M. | Time A.M. P.M. | Time A.M. P.M. | Time A.M. P.M. | Time A.M. P.M. | Time A.M. P.M. | Time A.M. P.M. | Time A.M. P.M. | Time A.M. P.M. | Time A.M. P.M. | Time A.M. P.M. | Time A.M. P.M. | Time A.M. P.M. | Time A.M. P.M. | Time A.M. P.M. | Time A.M. P.M. | Time A.M. P.M. | Time A.M. P.M. | Time A.M. P.M. | Time A.M. P.M. | Time A.M. P.M. | Time A.M. P.M. | Time A.M. P.M. |
| 107° | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 106° | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 105° | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 104° | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 103° | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 102° | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 101° | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 100° | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 99° | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 98° | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 97° | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Pulse per Minute | 96 | 120 | 104 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Respirations per Minute | 24 | 18 | 15 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Motions per 24 hours | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

(1002.) W9043—1195. 499,500. 1/15. K. & K. Forms/B. 181/3.

Signature Robt Black Capt Cam C In charge of case.

Army Form B. 2079.

**WARNING.**—*If you lose this Certificate a duplicate cannot be issued.*

Certificate of discharge of No. 2270 (Rank) Driver

(Name) Taylor A. E.

(Regiment) Canadian Engineers

who was enlisted at Toronto

on the 7. 6th 1915.

He is discharged in consequence of being no longer physically fit for War Service K. R. & O. Par 392 - Section XVI

after serving _____ years _____ days with the Colours, and _____ years _____ days in the Army Reserve.

(Place) Shorncliffe Signature of Commanding Officer J. Houlister Lieut. Col: O.C. Can: Engrs' Training Depot.

(Date) 23.12.1915

*Description of the above-named man on 23.12.15 when he left the Colours.

Age 27 years

Height 5' 7"

Complexion Fair

Eyes Blue

Hair Fair

Marks or Scars, whether on face or other parts of body.

Cut lower side jaw

2 cuts right wrist

Scar " thigh

N.B.—*Any person finding this Certificate is requested to forward it, in an unstamped envelope, to the Secretary, War Office, London, W.*

* *Should agree with the description on Character Certificate, Army Form B. 2067.*

A2977 Wt.W8242/2755 500,000 8/15 D. D. & L. Sch. 44. Forms/B.2079/21

# Recruiting Agents.

The following is an extract from the Recruiting Regulations, 1912:—

"Any man, whether Soldier or Civilian, who brings a Recruit to "a Recruiter, or to a Military Barrack, is a Recruiting Agent, "and it is not necessary that he should have been formally "appointed as such."

The effect of this Regulation is that anyone, whether ex-Soldier or Civilian, bringing a Recruit under the above Regulations is entitled to the reward if the Recruit is passed into the Service.

Recruiting Rewards will not be paid for—

(*a*) Boys under 17 years of age.

(*b*) Re-enlisted Pensioners.

(*c*) Recruits for the Armourer Section and the Machinery Artificer Section of the Army Ordnance Corps.

(*d*) Any Non-Commissioned Officer or Man of the Special Reserve who enlists into the Regular Army.

Recruiting Rewards will be paid to *Recruiting Agents* for each Recruit raised and finally approved for the Regular Army or the Special Reserve, at the following rates, viz.:—

**5s. to 2s. 6d. Regular Army.**

**1s. 6d. Special Reserve.**

Leaflets showing the conditions and advantages of the Army or Special Reserve are supplied gratis at every Post Office.

Men wishing to enlist should apply personally or by letter to the Officer Commanding the Regimental Depot nearest to their homes, or to any Serjeant Instructor of the Territorial Force or other Recruiter.

Men who have served in the Regular Army for 3 years or more are eligible under certain conditions for enlistment into the Special Reserve up to the age of 40.

LABORATORY. Canadian Military Hospital, Shorncliffe.

Unit. CE Date. Oct 19th 1915.

No. 2270 Ward. 7

Name. Taylor A.L. Med. Off. A. J. Swan Capt. CAMC

History of Case.

Clinical diagnosis.

Particulars of information required. Routine urinalysis

Examination of Urine. (routine will not include microscopical exam:)

Colour. Straw Albumin. neg Odour.

Sugar. neg Deposits. Acetone.

Re-action. acid Sp. gravity. 1026

Microscopic examination. Epitholium.

Blood. Pus. Phosphates.

Uric acid. Oxalates.

Examined by. N. N. Kirkup

This sheet must accompany all specimens of urine sent to the Laboratory.

5812

Forms. 1. 1237.

311970

Medical Case Sheet.

Army Form 1. 1237.

| No in Admission and Dischrage Book. | Regimental No. | Rank | Surname | Christian Name |
|---|---|---|---|---|
| | 2270 | | Taylor | A L |
| Year 5612 | Unit | | Age. | Service |
| | C. E | | 27 | 5/12 |

Station and Date Disease Tachycardia

Moore Barracks

Family History. Negative

Shorncliffe

Past Illness. Pleurisy. 2 years ago. Typhoid 7 yrs ago. No Rheumatic fever or Tonsillitis.

Two weeks ago Friday, faint on return from route march. Has been nervous ever since. No indigestion. No swelling of legs. Not sleeping well.

[illegible]
Capt C A M C.

P. T. O.

CERTIFICATE OF SERVICE.

(Issued following loss of Permanent Discharge Certificate MFW 39)

~~2270~~ ~~Private~~

THIS IS TO CERTIFY that No.....Rank.....

(Name in full) TAYLOR Arthur Lorne

Enlisted in Canadian Engineers.....

Canadian Expeditionary Force, on the Seventh day

of June 191 5.

He served in Canada and England

and was discharged at Toronto, Ont.

on the Twenty-fourth day of July 191 6.

by reason of being medically unfit for further service

His conduct and character while in the Service were "Good"

Director of Records.
for Lieut.-Col.,
A/

Ottawa, 5th day of May 19 9.

A. L. Taylor, Esq.,
c/o D.R.O., M.D. #2,
Address Toronto, Ont.

H.Q.
649-T-726

EBM.
DSCF 2#16A.
100-7/18.

92431.—W6490/1535.—2,000,000—J. J. K. & Co., Ltd.—Forms B. 103/1.

Army Form B. 103.

# Casualty Form—Active Service.

Regiment or Corps Can. Engr. Train. Depot

Regimental No. 2270 Rank Driver Name Taylor. A. L.

Enlisted (a) June 7th 15 Terms of Service (a) War Service reckons from (a) June 7th 1915

Date of promotion to present rank ____ Date of appointment to lance rank ____ Numerical position on roll of N.C.Os. ____

Extended ____ Re-engaged ____ Qualification (b) Teamster.

| Report | | Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case. | Place | Date | Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents. |
|---|---|---|---|---|---|
| Date | From whom received | | | | |
| | | Discharged - being no longer physically fit for War Service K. R. + O. Par 392. Sec XVI | | | |

J. Houlister Lieut. Col:
O.C. Can: Engrs'. Training Depot.

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.
(b) e.g., Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties.

[P.T.O

| Report | | Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case. | Place | Date | Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents. |
|---|---|---|---|---|---|
| Date | From whom received | | | | |
| | | | | | |

R—122.

Rank | Name TAYLOR Arthur Lorne. | Reg'l No. 2270

Unit C. E. Trg Depot | If in perm. Corps, What Unit? | Married or Single Single

Place and Date of Enlistment Toronto. 7th June. 1915 | Place of Birth McKellar. Ont.

Name and Address, Next-of-Kin Mrs. A. J. Taylor.

71 Metcalf St. Toronto. | Relationship Mother.

Assigned Pay Monthly $ | Payable to | Cav. # 29234

Relationship

Separation Allowance $ | Payable to

Relationship

Discharge, Date and Place Canada | Reason Med Unfit | Character

M.L. Can. P.R.

| Report Date | Report From whom received | Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case. | Place | Date | REMARKS Taken from Official Documents |
|---|---|---|---|---|---|
| | OC. | | | | |
| 18. 10. 15 | C.E. T.D. | Drunk in town $2 fine & 5 days C.B. | Shorncliffe | 14.10.15 | Pt II orders No. 62. |
| 19. 10. 15 | Do | Adm Moore Bks Hosp. | Do | 19.10.15 | " " " 63. |
| 23 10/15 | Do | Discharged from Hosp | Do | 22.10/15 | " " " 64. |
| 16 11/15 | Do | Drunk. Awd 7 days C.B. Fined 6$. | Do | 15 11/15 | " " " 6. |
| 6-1-16 | O/C C.E.T.D. | Struck off strength on proceeding to Canada for discharge | S'cliffe | 6/1/16 | Pt II O.O. #15 auth. M.R.O. para 392. Sec. 16 |
| 7-1-16 | Br. Gen Wm Dougall | Sailing for Canada per S.S. Missanabie for discharge | S'cliffe | 7/1/16 | R.O. Dt: 7/1/16. Extract from Routine Order. |

| Report | | Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case. | Place | Date | REMARKS Taken from Official Documents | |
|---|---|---|---|---|---|---|
| Date | From whom received | | | | | |
| | | | | | | |

1

# POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

T892

017841-A-9

Name Taylor, Arthur Lorne
(Surname) (Christian Name)

Regimental Number 2270 Rank Pte.

Unit C.E.T.D.

Original Unit 2nd R.D.

District where paid M.D.2.

Date of Discharge 24-7-16.

P. D. P. Filing Number 8-17-2.

Address (in full) 71 Metcalf St.,
Toronto, Ont.

Rates:—Regimental pay $ 1.00 per diem: Field Allowance $ .10 per diem. Separation Allowance $ per month.

L. L. 22573—M. & D. 8009.

| Total Credits 91 days | FIRST PAYMENT | | | SECOND PAYMENT | | | FINAL PAYMENT | | | Balance Over-payments to be Recovered | Total Amount Paid |
|---|---|---|---|---|---|---|---|---|---|---|---|
| | Cheque No. A | Date | Amount 30 days | Cheque No. B | Date | Amount 30 days | Cheque No. C | Date | Amount 31 days | | |
| 100 10 | 301 | 7-8-17 | 33 00 | 299 | 7-9-17 | 33 00 | 300 | 7-10-17 | 34 10 | | 100 10 |

M. F. W. 127.
50M—6 17.
1772-39-1140.

Remarks:

File No. 017841 A346.

# WAR SERVICE GRATUITY.

Register No. T892

1

Reg. No. 2270

Name Taylor Arthur Lorne

Address 71 Metcalfe St.
Toronto Ont

Pay Soldier $ 179 90

J. A. Retallack.
H. C. Hayden

Clerk

Dependent

Address

Pay Dependent $

Days 13½ Rate 20 Due 280.

Less P.D.P. credited 100. 10

Less further Dr. Bal. or overpayment.

Net 179.90

R.
W 129
8-10-19

| Date | Ck. Order | Ck. No. | Amount | Remarks. | Date | Ck. Order | Ck. No. | Amount. |
|---|---|---|---|---|---|---|---|---|
| | | m. 5-9-19 | | | | | | |
| 1 | 15799 | 512626 | 179 90 | | 1 | | | |
| 2 | x x | | x x | | 2 | | | |
| 3 | x x | | x x | | 3 | | | |
| 4 | | | | | 4 | | | |
| 5 | | | | | 5 | | | |
| 6 | | | | | 6 | | | |

495-D.P.-100M-6-19 (10248).

GEN'L AUDITOR
Posting checked by
A.H. Smith
Date. 3-9-19

P—56

Rank Dr. Name TAYLOR Arthur Lorne. Reg'l No. 2270

Unit C. E. Trg Depot If in perm. Corps, What Unit? Married or Single Single

Place and Date of Enlistment Toronto. 7th June.1915 Place of Birth McKellar. Ont.

Name and Address, Next-of-Kin Mrs. A. J. Taylor.

71 Metcalf St. Toronto. Relationship Mother.

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

| Date From 1915 | Date To | PAY No. of Days | PAY Rate | PAY Amount | Field Allowance No. of Days | Field Allowance Rate | Field Allowance Amount | Other Credits | Total Credits | Voucher No. | Voucher Date | Cash Payments | Assigned pay | Other Charges | Total Debits | Balance | Remarks, Casualties, etc. |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| July 1 | 31 | 31 | 1.00 | 31 | 31 | 10 | 3 10 | 8 40 x<br>32 50<br>27 | 42 50 | | | 10 | | | 10 | 32 50 | x Credit from Canada<br>27¢ = diff. in Exchange from 1/7/15 to 31/7/15 |
| Aug 1 | 31 | 31 | 1.00 | 31 | 31 | 10 | 3 10 | 32 77 | 66 87 | | | 29 21 | | | 29 21 | 37 66 | |
| Sep 1 | 30 | 30 | | 30 | 30 | | 3 | 37 66 | 70 66 | | | 53 52 | | 1 09<br>1 05 | 55 66 | 15 | 1.09 Clothing 95<br>1.05 Voucher 84<br>Drunk fined 2 00 P II 62 |
| Oct 1 | 31 | 31 | | 31 | 31 | | 3 10 | 15 | 49 10 | | | 26 76 | | 2 | 28 76 | 20 34 | |
| Nov 1 | 30 | 30 | | 30 | 30 | | 3 | 20 34 | 53 34 | | | 34 07 | | 6 | 40 07 | 13 27 | Fined 6 00 P II 6 |
| Dec. 1 | 31 | 31 | | 31 | 31 | | 3 10 | 13 27 | 47 37 | | | 29 20 | | | 29 20 | 18 17 | |
| 1916 Jan 1 | 7 | 7 | | 7 | 7 | | 70 | 18 17 | 25 87 | | | | | | | 25 87 | Discharged H.Q 12/33 Jan. 4th |
| Bal on trfr to N.E. Bch. | | | | | | | | 25 87 | | | | | | | | | |
| NE Mch 16 | | | | | | | | | 25 87 | | | | | 25 87 | 25 87 | ~~25 87~~ | |

Bal nil Transd to "Can. Liability Disch'ge a/c"

| Date | | PAY | | | Field Allowance | | | Other Credits | Total Credits | Voucher | | Cash Payments | Assigned pay | Other Charges | Total Debits | Balance | Remarks, Casualties, etc. |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| From | To | No. of Days | Rate | Amount | No. of Days | Rate | Amount | | | No. | Date | | | | | | |

M. F. W. 41.
10m.—11-15.
1772-39-889.

(110)

Name Taylor Arthur L Sapper

Regimental No. 2270

Unit C.E. T.D.

Date of enlistment

Place of "

Married (yes or no) No

Amount of pay assigned monthly $ 1004 ~~20.00 from 15/1/15 to 31/1/16~~ ~~Mrs Nellie Taylor~~ ~~Logan~~ ~~$250.00~~ ~~Av. Toronto.~~

a.P. Nil

To whom payable

~~Name and~~ Home address of ~~next-of-kin~~ 71 Metcalfe St. Toronto

M. B. recom. 3 mos treatment 18-1-16
add to central Conv. Home Toronto 21-1-16

Date and place discharged

Reason for discharge

Character on discharge

S.S. Missanabie 17-1-16 Class II 649-T-726

L... 87694. M. & D. 6128.

| Date From | Date To | PAY No. of Days | PAY Rate | PAY Amount | Field Allowance No. of Days | Field Allowance Rate | Field Allowance Amount | Other Credits | Total Credits | Voucher No. | Voucher Date | Cash Payments | Assigned Pay | Other Charges | Total Debits | Remarks, Casualties, etc. |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 8/1/16 | 7/1/16 29/2/16 | 53 | 1 | 53 – | 53 | 10 | 5 30 | 16 14 Sub. 21 75 | 96 19 | B 626 | 16/2/16 | O 26 19 | X | +70 – | 96 19 | L.P.C. O.H.Q. Pd. +D.D. Quebec Pd |
| Recovered by P.M. MD "2" | | | | | | | | 21.75 | 21 75 | | | | | +21 75 | 21 75 | + Subs, not allowed Letter to P.M. 2/D to recover – 13-4-16 Recoved by P.M. M.D 2 16-4-16 |

Discharged 24/7/16

From 1-3-16 2/D

Name.....

Regimental No.

Unit

Date of enlistment

Place of "

Married (yes or no)

Amount of pay assigned monthly $

To whom payable

Name and address of next-of-kin

Date and place discharged

Reason for discharge

Character on discharge

| Date | | PAY | | | Field Allowance | | | Other Credits | Total Credits | Voucher | | Cash Payments | Assigned Pay | Other Charges | Total Debits | Remarks, Casualties, etc. |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| From | To | No. of Days | Rate | Amount | No. of Days | Rate | Amount | | | No. | Date | | | | | |
| | | | | | | | | | | | | | | | | |

2

This space to be left blank for the Chelsea Number.

1667 ✓

1116.

CENTRAL REGISTRY REFERENCE. R.O. 10-T-20 24 DEC. 1915 DIRECTOR OF RECORDS MILITARY HEADQUARTERS — C. E. F. —

Army Form B. 268.

DEPT MILITIA & DEFENCE JUL 13 1916 OTTAWA CANADA

649 T-726

# Proceedings on Discharge.

(When forwarded for confirmation the documents named on page 4 should be enclosed.)

No. 2270 Army Rank Driver

Name Taylor A.L.

(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)

MILITIA DISTRICT MAR 16 1916 35-7a-13

Corps C.E.F. D.

Battalion, Battery, Company, Depôt, &c.

(If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &c., or to General Staff of the Army, it should be so stated.)

Date of discharge July 24/16

Place of discharge Toronto Canada.

1. *Description at the time of discharge.*

| | | | |
|---|---|---|---|
| Age | 27 | years 5. | months |
| Height | 5 | feet 7. | inches |
| Chest measurement | girth when fully expanded | 40 | ins. |
| | range of expansion | 4 | ins. |
| Complexion | Fair | | |
| Eyes | Blue | | |
| Hair | Fair | | |
| Trade | Teamster. | | |
| Intended place of residence (To be given as fully as practicable) | | | |

Descriptive marks.

Cut lower side Jaw.
2 Cuts right Wrist.
Scar " thigh

(The measurements and description should be carefully taken on the day the man leaves his unit, but in the case of men sent home from abroad for discharge, the age and intended place of residence should be left blank to be filled in by the Officer who confirms the discharge at home.)

2. The above-named man is discharged in consequence of being no longer physically fit for War Service K. R. + O. Par 392 - Sec XVI

(The cause of discharge must be worded as prescribed in the King's Regulations and be identical with that on the discharge certificate. If discharged by superior authority, the No. and date of the letter to be quoted.)

To be filled in on the soldier quitting the Colours.

3. Military character :— Good -

4. Character awarded in accordance with King's Regulations :—

Certified that the above is an accurate copy of the character given by me on Army Form B. 2067* and that Army Form D. 489 was awarded in this case

Initials of Commanding Officer.

Army Form B. 2088 has been issued to*

Boarded 21/7/16



*Strike out if not applicable.

[OVER.

5. He is in possession of the following number of G.C. badges (if the man is a N.C.O. and enlisted prior to 1st July, 1881, the number he would have been entitled to had he not been promoted should be stated).

Is it probable that he will be entitled to another good conduct badge before the confirmation of these proceedings ?

Classification for service, or proficiency pay ... ... ... ... ... Class _____

6. Campaigns, Medals and Decorations

Certificate of education .....

7. His accounts are correctly balanced, and I have impartially inquired into all matters brought before me in accordance with Regulations.

(Place) Shorncliffe

(Date) 23. 12. 1915.

J. Houlister Lieut. Col.
O.C. ~~Can.~~ Engrs'. Training Depot.
Commanding _____ Battn. _____ Regiment.

8. *Certificate to be signed by the soldier on discharge.*

I hereby acknowledge that I have received all my pay and allowances (including clothing allowance), and all just demands up to the present date, subject to the reservations of the claims noted on the 3rd page.

(*Place*) _____ _____ (*Signature of Soldier.*)

(*Date*) _____ _____ (*Signature of Witness.*)

(When a soldier is absent through illness or any other cause, and it is not desirable to forward these proceedings to him for signature, a manuscript copy should be sent for the man to sign, and when returned should be attached here.)

9. *Additional certificate in the case of a soldier who takes his discharge at his own request.*

I hereby declare that I do of my own free will request to be discharged from His Majesty's Service.

_____ (*Signature of Soldier.*)

10. *Statement of service.*

Service towards engagement to _____ (the date to which the record of service is completed) _____ years _____ days.

Further service „ „ _____ (the date of confirmation of discharge) ... ... _____ „ _____ „

Total ... _____ „ _____ „

11. *Confirmation of discharge.*

The discharge of the above-named man is hereby confirmed for July 24/16 (date)

(Place) Toronto

(Date) July 9/16

*Signature* J. Mason Col. for Aag. 2 M.D.

Commanding officers (or the Paymaster, if at Netley) will issue to every discharged soldier whose claim to pension, either on account of service or disability, is to be brought under the consideration of the Chelsea Board, a memorandum for his guidance on Army Form D. 401, and will at the same time transmit to the Secretary, Royal Hospital, Chelsea, a descriptive return of the man on Army Form D. 400.

RESERVATIONS REFERRED TO AT PARA. 8.

(To be signed by the soldier. When there are none, it is to be so stated, and signed by the soldier.)

LIST OF DISCHARGE DOCUMENTS.

1. Proceedings on discharge. (Army Form B. 268.)
2. Proceedings on transfer to reserve (if any). (Army Form B. 2056.)
3. Duplicate attestation.
4. Army Form B. 97 (if any).
5. Declaration of change of name (if any).
6. Re-engagement paper (if any). (Army Form B. 136.)
7. Authority for continuance, or extension, of service (if any). (Army Form B. 221.)
8. Court of Inquiry on an injury (if any) (Army Form A. 2.)
9. Regimental conduct sheet. (Army Form B. 120.)
10. Company conduct sheet. (Army Form B. 121.)
11. Copies of convictions by Civil Power (if any).
12. Medical history sheet. (Army Form B. 178.)
13. Medical report on invalid (if any). (Army Form B. 179.)
14. Copy of receipt for purchase money (if any).
15. Attestation of fraudulently enlisted man for corps in which he has not been held to serve (if any).
16. Detailed statement of former service allowed to reckon towards pension (if any).
17. Copy of 3rd page attestation (in the case of men from abroad entitled to deferred pay who go to Netley or the discharge depôt for discharge).
18. Descriptive return (Army Form D. 400), where required. See section 11 on second page.
19. Active service casualty form. (Army Form B. 103.)
20. Employment sheet. (Army Form B. 2066.)

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In the case of recruits who are rejected before, or on, final approval, the discharge documents will consist of—

1. Duplicate attestation. (On third page the date and cause of discharge will be entered and signed by the competent military authority.)
2. Medical history sheet (if any). (Army Form B. 178.)

# Instructions as to the preparation, despatch, and custody, of discharge documents.

1. When a soldier is to be discharged, the documents retained with the duplicate attestation will be placed inside this form. Should any of the documents be missing, an explanation of the deficiency, signed by the commanding officer, must be substituted for the missing document. The officer in charge of records will then extract from the original attestation, any documents required to complete the list of discharge documents enumerated in the margin, which will then be placed in this form in the sequence given.

2. When men are discharged from the colours at home as medically unfit, or with claims to pension, Army Form B. 268 will be sent confirmed, together with the duplicate attestation and documents retained therein to the officer in charge of records 10 days in advance of the date for discharge in the case of invalids, and 14 days in other cases. This officer will then extract from the original attestation any documents required to complete the list of discharge documents enumerated in the margin, place them in this form, and after carefully checking the duplicate attestation with the original forward the whole to the Secretary, Royal Hospital, Chelsea. When such men are discharged abroad, the same procedure will be adopted as above, with the exception that the discharge documents will be sent to the officer in charge of records immediately after discharge takes place (except in the case of men who are granted gratuities on discharge from local battalions or companies, Royal Artillery).

3. When soldiers are sent home from abroad for discharge, the documents retained with the duplicate attestation will be placed inside this form and sent home with the men for transmission to the officer who carries out the discharge, together with the following additional forms :—

(*a*) Discharge certificate (Army Form B. 2079 or Army Form B. 264).
(*b*) Character certificate (Army Form B. 2067) if entitled.
(*c*) Copy company conduct sheet (Army Form B. 121) when required under King's Regulations.

The duplicate attestation and documents retained therein will be sent to the officer in charge of records, who will extract from the original attestation any documents required to complete the list of discharge documents enumerated in the margin and place them in this form.

4. The discharge documents of re-enlisted pensioners, on re-discharge, will be sent to the officer in charge of records, who will extract from the original attestation any documents required to complete the list of discharge documents enumerated in the margin, place them inside this form, and forward the whole to the Secretary, Royal Hospital, Chelsea, irrespective of the cause of discharge.

5. The original and duplicate attestations of recruits who are rejected before, or on, final approval will be retained by the approving officer for one year, when they will be destroyed.

6. In all other cases the discharge documents will be sent, directly the discharge is carried out, to the officer in charge of records of the unit concerned.

7. Postage need not be paid, and receipts are not required, in the case of documents sent to Chelsea or to the War Office.

8. When the discharge documents of men not entitled to pension are sent to the officer who will have final charge of them, they are to be accompanied by Army Form B. 279, and that officer will, if they are found to be correct, sign and return Army Form B. 279. Should any document be missing, he must at once apply for it.

9. The officers having final charge of the discharge documents will arrange them according to regimental numbers, and enter the names in the alphabetical index, Army Book No. 129.

Army Form B. 179.

# Medical Report on an Invalid.

Station Shorncliffe.

Date December 3rd 1915.

1. Unit C.E.T.D.
2. Regimental No. 2270
3. Rank Driver.
4. Name Taylor A.L.
5. Age last birthday 27
6. Enlisted { on June 7th 1915. at Toronto
7. Former Trade or Occupation { Liveryman.

## 8. Disability.

1. Defective vision.
2. Loss of cardiac tone.

## Statement of Case.

*Note.—The answers to the following questions are to be filled in by the Officer in medical charge of the case. In answering them he will carefully discriminate between the man's unsupported statements and evidence recorded in his military and medical documents. He will also carefully distinguish cases entirely due to venereal disease.*

9. Date of origin of disability. September 15th 1915.

10. Place of origin of disability. Shorncliffe Camp.

11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case. Has had a right squint since birth but no eye trouble while going to school or since until 2 months ago. While on route march, climbing hill, became sick, dizzy and fainted. Sent to Moore Barracks Hosp. for five days. Recommended to go to Convalescent Home but returned to lines. While attempting duty since was short of breath and vision affected.

12. (*a*) Give your opinion as to the causation of the disability.

(*b*) If you consider it to have been caused by active service, climate, or ordinary military service, explain the specific conditions to which you attribute it (*See notes on page 3*).

Eye trouble.
Heart conditions.

Aggravated by ordinary military service.

13. What is his present condition ?

*Weight should be given in all cases when it is likely to afford evidence of the progress of the disability.*

**Unable to perform duties on account of defective vision and dizziness with shortness of breath on exertion.**

**Heart sds. Loss of muscular tone.**

Very nervous & tremulous. Quite useless as a soldier.

Dam

14. If the disability is an injury, was it caused

(*a*) In action ?

**Not applicable.**

(*b*) On field service ?

(*c*) On duty ?

(*d*) Off duty ?

15. Was a Court of Inquiry held on the injury ?

**No.**

If so—(*a*) When ?

(*b*) Where ?

(*c*) Opinion ?

16. Was an operation performed ? If so, what ?

**No.**

17. If not, was an operation advised and declined ?

**No.**

18. *In case of loss or decay of teeth.* Is the loss of teeth the result of wounds, injury or disease, directly* attributable to active service ?

**Not applicable.**

19. Do you recommend

(*a*) Discharge as permanently unfit, or
(*b*) Change to England ?

**Discharge.**

W. E. Sinclair Capt.
C. A. M. C.

Officer in medical charge of case.

I have satisfied myself of the general accuracy of this report, and concur therewith, *except*†

Station_____

_____

Officer in charge of Hospital.

Date_____

*Loss of teeth on, or immediately after, active service, should be attributed thereto, unless there is evidence that it is due to some other cause.

† Delete this word if no exceptions are to be made.

# Opinion of the Medical Board.

NOTES.—(i.) Clear and decisive answers to the following questions are to be carefully filled in by the Board, as, in the event of the man being invalided, it is essential that the Commissioners of Chelsea Hospital should be in possession of the most reliable information to **enable them to decide upon the man's claim to pension.**

(ii.) Expressions such as "may," "might," "probably," &c., should be avoided.

(iii.) The rates of pension vary directly according to whether the disability is attributed to (*a*) active service, (*b*) climate, or (*c*) ordinary military service. It is therefore essential when assigning the cause of the disability to differentiate between them (*see* Articles 1162 and 1165, Pay Warrant, 1918).

(iv.) In answering question 20 the Board should be careful to discriminate between disease resulting from military conditions and disease to which the soldier would have been equally liable in civil life.

(v.) A disability is to be regarded as due to climate when it is caused by military service abroad in climates where there is a special liability to contract the disease.

20. (*a*) State whether the disability is the result of (i.) active service, (ii.) climate, or (iii.) ordinary military service.

(*b*) If due to one of these causes, to what specific conditions do the Board attribute it?

i. no
ii. no
iii. no

not applicable

21. Has the disability been aggravated by

(*a*) Intemperance? no

(*b*) Misconduct? no

(*c*) Any of the conditions mentioned in question 20, and if so, which? not applicable

22. Is the disability permanent? yes. (military life only) except eye.

23. If not permanent, what is its probable minimum duration?

*To be stated in months.* not applicable

24. To what extent is his capacity for earning a full livelihood in the general labour market lessened at present?

*In defining the extent of his inability to earn a livelihood, estimate it at ¼, ½, ¾, or total incapacity.*

none compared with capacity on enlistment

24A. Is the man suffering from a disability which would *obviously*, as far as you can judge, cause him to be rejected by an Approved Society under the National Insurance Act? not applicable

25. If an operation was advised and declined, was the refusal unreasonable? not applicable

19 DEC 1915

26. Do the Board recommend

(*a*) Discharge as permanently unfit, or yes

(*b*) Change to England? no

APPROVED
for MAJOR D.A.A.G. OF D. OF R. & C. FOR
BRIGADIER GENERAL
COMMANDING
CANADIAN TRAINING DIVISION, SHORNCLIFFE.

Signatures:—

President.

Members.

Station Shorncliffe

Date Dec 14/15

**Approved.**

Station Shorncliffe

Date 15th Dec. 1915.

Administrative Medical Officer.

Capt. A/D.A.D.M.S.

Canadian Training Division, Shorncliffe.

*(On leaving Corps or Station where invalided.)*

Transfer { Date _____ / Station _____ } *or* Embarkation { Date _____ / Port _____ }

Name of { Conveyance _____ / Vessel _____ / Officer in medical charge } _____

Brief remarks on case during transit, and state on transfer for final disposal.

Re-transferred { Date _____ / Hospital or Station } _____

_____
Officer in medical charge.

*(At Station or Hospital where finally disposed of.)*

Station and Hospital } _____

Arrived from _____ Date _____

| If admitted | If under treatment | | Disease | How finally disposed of | Date of Discharge, &c. |
|---|---|---|---|---|---|
| Date | From | To | | | |
| | | | | | |

Detailed statement as to condition on discharge and whether discharged as an invalid, to corps, to station, or to depôt. In cases of discharge from the service it should be stated whether the answers to questions 22, 23 and 24 are concurred in.

Date of final Medical Board, or decision } _____

_____
Administrative Medical Officer.

Army Form B. 179.

MEDICAL REPORT ON AN INVALID.

Station _____

Corps _____

Regimental No. _____

Rank _____

Name _____

Disability _____

Date _____

Hospital or Station transferred to for final disposal } _____

Date of final disposal } _____

How finally disposed of } _____

The original Report is invariably to accompany the discharge documents of Invalids.

Forms B. 179. 34

Wt. W8530/2774 500M. 9-15 M.&C.Ld.

ARMY FORM B. 178.

**To be used (*a*) for recruits enlisting direct into the Regular Army, and (*b*) for men of the Territorial Force when they are admitted to Hospital. Army Form B. 178A to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.**

# MEDICAL HISTORY of

*Surname* Taylor *Christian Name* Lorne

TABLE I.—GENERAL TABLE.

Birthplace ... Parish Parry Sound County Ontario.

Examined ... ... ... on 3rd day of December 1915,
at C. A. S. C. T. D.

Declared Age ... ... 27 years 152 days.

Trade or Occupation ... Teamster.

Height ... ... ... feet inches.

Weight ... ... ... lbs.

Chest Measurement { Girth when fully Expanded ... inches.
Range of Expansion ... inches.

Physical Development ...

Vaccination Marks { Arm ... Right Left
Number

When Vaccinated ... ...

Vision ... ... ... { R.E.—V=
L.E.—V=

(*a*) Marks indicating congenital peculiarities or previous disease ... (*a*)

(*b*) Slight defects but not sufficient to cause rejection ... ... ... (*b*)

Approved by (*Signature*)
(*Rank*) *Medical Officer.*

Enlisted ... ... ... at Toronto.
on 4th day of June 191.

| Joined on Enlistment ... | Corps | Regtl. No. |
|---|---|---|
| | Canadian Engineers. | 2270. |
| Transferred to ... ... | | |

Became non-effective by ...

on day of 191.

(*Signature*)
(*Rank*)

(4887.) W. 9597/1588. 500M. 9/15. C. P., LTD.

Forms B. 178 89

P.T.O.

## Table II.—Only for Admissions to Hospital or to the Sick

| Name of Hospital | Admitted to Hospital | | | Discharged from Hospital | | | Disease | Number of days in Hospital | Remar |
|---|---|---|---|---|---|---|---|---|---|
| | Day | Month | Year | Day | Month | Year | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | |

**List in the case of Warrant Officers treated in quarters.**

| s bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet. | Signature of Medical Officer |
|---|---|
| | |
| | |
| | |

**Table III.—Boards; Courts of Inquiry, Vaccination, Inoculations, etc.; Examinations for Field or Foreign Service, Extension, Re-engagement, or Prolongation of Service; Issue of Surgical Appliances; Particulars of Dental Treatment, etc.**

| Date | Brief details, and signature |
|---|---|
| Dec 14-15 | Discharge W M Mearns Sgt Maj<br>PRESIDENT, STANDING MEDICAL BOARD. |
| 15 Dec 15 | Approved G H Boulby<br>Capt. A.D.A.D.M.S.<br>Canadian Training Division, Shorncliffe. |

**Table IV.—Service Table.**

| Station or Troopship | Date of arrival or embarkation | Date of departure or disembarkation | Station or Troopship | Date of arrival or embarkation | Date of departure or disembarkation |
|---|---|---|---|---|---|
| | | | | | |

ORIGINAL.

A2171 Wt. W774/836. 250,000 4/15 D. D. & L. Sch. 2 Forms — A. 2 — 38 Army Form A. 2.

PROCEEDINGS of a* Pensions & Claims Board.

*N.B. — The Form being applicable to any Board of Officers, or Committee, or Court of Inquiry, this blank to be filled in accordingly.

The proceedings should be signed by each Officer composing the Board, etc.

assembled at Folkestone, Kent, England.

on the 4th day of January 1916.

by order of G.O.C., R.O. 2541 Sept. 21st 1915.

for the purpose of Pensions & Claims.

PRESIDENT.

Lt.Col. Sir H. Montagu Allan.

MEMBERS.

Lt.Col. W. Grant Morden.
Major J.L.Todd. C.A.M.C.
Major R. Raikes. C.A.M.C.
Major Maurice Alexander. C.A.P.C.
Hume Blake Esq., K.C.

IN ATTENDANCE.

Lt.Col. Sir H. Montagu Allan.
Lt.Col. W. Grant Morden.
Major R. Raikes. C.A.M.C.
Hume Blake Esq. K.C.

The Board having assembled pursuant to order, proceed to take evidence.

No. 2270.
Driver Arthur Lorne TAYLOR.
C.E.T.D.

21

FA

# FINDING

The Board having considered the evidence of Driver Arthur L. Taylor, No.2270, C.E.T.D., and the documents submitted, hereto attached and marked, which form part of these Presents:-

Finds:-

1. That this man is suffering from a disability which existed prior to enlistment.

2. That he has suffered no reduction in his capacity for earning a livelihood in the general labour market by reason of his service.

3. He is not entitled to a Pension.

Recommends:-

4. That he be not granted a Pension.

Signed at 41, Grimston Avenue, Folkestone, this 4th day of January, 1916.

H. Montagu Allan — Lt. Col. President.

W. Grant Morden — Lt. Col.

[illegible] — Major C.A.M.C.

[illegible] — ~~K.C.~~ Civil Member.

8

Name ? TAYLOR Arthur Lorne.

Regimental No. 2270. Rank - Driver. Unit - C.E.T.D.

Date of Birth ? July 15th 1888.

Place of Birth ? McKellar. Ont. Canada.

Occupation or trade previous to enlistment ? Teamster.

Date of enlistment ? June 7th 1915.

Place of enlistment ? Toronto.

Are you married or single ? Single.

Have you a widowed mother dependent on you solely for support ? No

What was the condition of your health at the time of your enlistment ? Good.

Where and when did your disability originate ? Shorncliffe Camp. Sept. 15th 1915.

Is your disability the result of wounds, injuries or illness contracted in action, in the presence of the enemy, or on active service during training or other duties ? Previous condition aggravated by Military service. Defective Vision. Loss of cardiac tone.

What is your present conditoon of health ? Poor

What work, if any, are you fit for ? Light work

Have you any civil employment open to you at present ? No

What is your present address ? C.E.T.D. R.E. Barracks, Shorncliffe.

Where do you wish to take your discharge if granted ? In Canada.

I, having been duly sworn, declare that I have read the answers given by me to the above questions which are true and correct, and I have signed -

A. L. Taylor

Witnessed by Harold E. Gellatly Lieut

* N.B.—This Form being applicable to any Board of Officers or Committee or Court of Inquiry, this blank to be filled in accordingly.

The signature of each Officer composing the Board, &c., should be attached to the end of the proceedings.

PROCEEDINGS of a * Medical Board

assembled at Central Military Convalescent Hospital, Toronto.

on the 9th., March, 1916.

by order of A.D.M.S., 2nd Division.

Second Divisional Area
10 1916
2D 34-T-90

for the purpose of examining and reporting on #

# 2270 Pte A. L. Taylor C.E.

MILITIA DEFENCE
MAR 2[illegible] 1916
H.Q.
CANADA

PRESIDENT. F. D. Rogers Capt. A.M.C.

MEMBERS. A. G. Fay Capt. A.M.C.

W. Watson Lieut. A.M.C.

The Medical Board having assembled pursuant to order, proceed to examine # 2270. Pte A. L. Taylor. C.E.

and report that:

1. Present Condition:

Tachycardia -
Fine tremor -

9

2. Extent to which his capacity is lessened for earning a full livelihood in the general labour market at present:

1/4 disability -

3. Probable minimum duration of the disability:

Three ~~the~~ months. 3.

4. Whether treatment in a Convalescent Home would materially assist in his recovery:

Would recommend that he be allowed to take on some light duty, ~~without~~ pay on allowances ~~to~~ continue.

J. D. Rogers Capt. A.M.C.

W. V. Watson M.B. Lieut. A.M.C.

30-3-16 approved C. A. Warren Major p.a.D.M.S.

C. G. Ley Capt. A.M.C.

APPROVED for physical findings & recommend for treatment

MAR 26 1916

Oscar H. Cannon, Capt. for ..... D.G.M.S.

Address: 71 Metcalfe St., Toronto
Next of Kin – Mother (Same address) N7829

# MEDICAL HISTORY OF AN INVALID.

1. Station. Toronto
2. Regiment or Corps. C.E.T.D.
3. Regimental No. and Rank. 2270. Rfvr.
4. Name. Taylor. Arthur Lorne.
5. Age last Birthday. 27.
6. Enlisted on ~~Jan~~ June 7th 1915 at Toronto.
7. Former Trade or Occupation. Teamster.

8. General remarks on his :—
   (a) Conduct.
   (b) Habits.
   (c) Temperance.

DEPT MILITIA & DEFENCE JUL 18 1916 H.Q. 49-1-7-16 CANADA

(For this purpose the Company defaulter sheets will be obtained from the man's Commanding Officer.)

Date. June 26/16

9. Service.

| | Years. | Days. | PERIODS. From. | PERIODS. To. |
|---|---|---|---|---|
| | | | | |

10. (a) Disease or disability. Tachycardia and tremor
    (b) Date of origin. Sept. 1915
    (c) Place of origin. Shorncliffe
    (d) Cause. Was nervous and was thrown from a horse 3 times at Shorncliffe.

11. Present Condition. (Most Important).
(To include full description of present disabling condition or conditions.)
Pulse rate 130–140 standing and being examined. Slows rapidly on lying down to about 80. No hypertrophy or dilatation. Tremor comes with excitement. Reflexes normal. On greater excitement he gets nauseated and faints. Has a squint. Wasserman negative.

12. (a) Is the disability the result of service or climate?
    (b) Has it been aggravated by intemperance, vice or misconduct?

Result of service and probably aggravated by use of alcohol.

M. F. B. 227,
100 M—2-16.
1772-39-117.

13. (a) For purpose of Identification. (Here a full description of wounds, scars, deformities, etc., is to be given.)

Two transverse scars 1 in long 1 and 3 inches ~~above~~ above rt wrist on front of forearm.

(b) In case of wounds, or other injuries, state whether sustained on or off duty. If not received in action, was a Court of Inquiry held? —

(c) In the event of the disability being attributed to exposure on duty, state clearly the nature of such exposure, and whether it was exceptional or otherwise. —

14. Treatment Moore Barracks 3 weeks.

15. If the disabling condition had its origin before enlistment, has it been aggravated by service, and to what extent? —

16. What is the probable duration of the disability or of each disabling condition, if more than one contributes?

Permanent.

17. To what extent will it prevent his earning a full livelihood in the general labour market? Please state in fractions.

One eighth disability ½ due to tachycardia and ½ to tremor, ~~may~~ be due to service

18. State if for discharge on account of unfitness for Service.

Unfitness

John A. Ollie.

Medical Officer by whom the case is brought forward.

# OPINION OF THE MEDICAL BOARD.

Does the Board concur with the preceding report? If not, give differing opinion.

10. Yes Yes

11. Yes

12. Yes

15.

16. Yes

17. 1/8 disability & not due to service

19. Is he unfit for Military Service. Unfit for service

20. Recommendations: This Board concurs in the above report and recommends discharge without pension

Signatures :— H. J. Hamilton & Col Ame C

President.

Brig R C Reeves | S R Mel

Station. Tant

Date. 29/6/'16

A. G. Ley Capt Ame

Members.

Date. 3/7/16

J Meadow - Col

Asst. Director of Medical Services.

Approved.

Date. 20/7/16

Dear H Cannon Capt

Director-General of Medical Services.

23

(At Station or Hospital where finally disposed of.)

Station and Hospital } ..... Arrived from } .....

Date .....

| If admitted. | If under treatment. | | Disease. | How fully disposed of. | Date of Discharge, &c. |
|---|---|---|---|---|---|
| Index No. | From | From | | | |
| Date ..... | ..... | ..... | ..... | ..... | ..... |
| ..... | ..... | ..... | ..... | ..... | ..... |
| ..... | ..... | ..... | ..... | ..... | ..... |

Summary of Causes of invaliding, or remarks as to remand to Regiment, Station or Depôt.

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Date of final Medical Board or decision. } .....

Administrative Medical Officer.

**DETAILED MEDICAL HISTORY OF INVALID.**

Militia Form B. 227.

100 m-9-16.
H. Q. 1772—39—117.

Station .....

Corps .....

Regimental No. ..... Rank .....

Name .....

Disability .....

Date .....

Hospital or Station transferred to for final disposal. } .....

Date of final disposal } .....

How finally disposed of } .....

The original Report is invariably to accompany the discharge documents of invalids.